

FEC  
FORM 3X

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

RECEIVED  
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2016 JAN 19 AM 11:58

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

ADDRESS (number and street)

C00343384 051906 N 298  
DANIEL P FERRIS  
SECURA INSURANCE A MUTUAL COMP  
ANY PAC (SECURA INS PAC)  
2401 S MEMORIAL DRIVE  
APPLETON WI 54915



Check if different  
than previously  
reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C 00343384

3. IS THIS  
REPORT



NEW  
(N)

OR



AMENDED.  
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:



April 15  
Quarterly Report (Q1)



July 15  
Quarterly Report (Q2)



October 15  
Quarterly Report (Q3)



January 31  
Year-End Report (YE)



July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)



Termination Report  
(TER)

(b) Monthly  
Report  
Due On:



Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)



Nov 20 (M11)  
(Non-Election  
Year Only)



Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)



Dec 20 (M12)  
(Non-Election  
Year Only)



Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:



Primary (12P)



General (12G)



Runoff (12R)

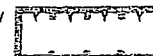


Convention (12C)



Special (12S)

Election on



in the  
State of



(d) 30-Day  
POST-Election  
Report for the:



General (30G)

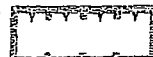


Runoff (30R)



Special (30S)

Election on



in the  
State of



5. Covering Period

07

01

2015

through

12

31

2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Daniel P. Ferris

Signature of Treasurer

*Daniel P. Ferris*

Date

01

13

2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only

FEC FORM 3X  
Rev. 12/2004

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

SECURA INSURANCE A MUTUAL COMPANY PAC (SECURA INS PAC)

Report Covering the Period:

From:

07 / 01 / 2015

To:

12 / 31 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2015		2,899.00
(b) Cash on Hand at Beginning of Reporting Period.....	4,448.00	
(c) Total Receipts (from Line 19).....	2,893.47	5,538.12
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	7,341.47	8,437.12
7. Total Disbursements (from Line 31).....	5,095.47	6,191.12
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	2,246.00	2,246.00
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

SECURA INSURANCE A MUTUAL COMPANY PAC (SECURA INS PAC)

Report Covering the Period:

From:

07' 01' 2015

To:

12' 31' 2015

## **I. Receipts**

**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

### 11. Contributions (other than loans) From:

#### (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

2155.00

2155.00

(ii) Unitemized.....

643.00

3192.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

2798.00

5347.00

(b) Political Party Committees.....

(c) Other Political Committees

(such as PACs).....

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5).....▶

### 12. Transfers From Affiliated/Other

Party Committees.....

### 13. All Loans Received.....

### 14. Loan Repayments Received.....

### 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

95.47

191.12

### 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

### 17. Other Federal Receipts

(Dividends, Interest, etc.).....

### 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

(c) Total Transfers (add 18(a) and 18(b))..

### 19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)).....▶

2893.47

5538.12

### 20. Total Federal Receipts

(subtract Line 18(c) from Line 19).....▶

2893.47

5538.12

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

## **II. Disbursements**

**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....		
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures .....	95.47	191.12
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....		
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5,000.00	6,000.00
24. Independent Expenditures (use Schedule E) .....		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....		
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs).....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....		
29. Other Disbursements .....		
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....		
(ii) "Levin" Share.....		
(b) Federal Election Activity Paid Entirely With Federal Funds .....		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	5,095.47	6,191.12
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) .....	5,095.47	6,191.12

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	2798.00	5347.00
34. Total Contribution Refunds (from Line 28(d)) .....	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2798.00	5347.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	95.47	191.12
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	95.47	191.12
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0	0

2010-01-10 PM 00:00:00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: (check only one)		PAGE	OF
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

SECURA INSURANCE A MUTUAL COMPANY PAC (SECURA INS PAC)

A. Full Name (Last, First, Middle Initial) Philip J. Diwan

Mailing Address W6419 Sonny Dr.

City Menasha State WI Zip Code 54952

FEC ID number of contributing federal political committee. C 00343384

Name of Employer SECURA Insurance, A Mutual Company Occupation Sr. Product Manager

Receipt For:  
☐ Primary ☒ General  
☐ Other (specify)   

Aggregate Year-to-Date 265.00

Date of Receipt

   /    /   

Amount of Each Receipt this Period

265.00

\$ 10.00 bi-weekly

B. Full Name (Last, First, Middle Initial) Anthony J. Breunier

Mailing Address 3812 Indian Shores Rd.

City Winneconne State WI Zip Code 54986

FEC ID number of contributing federal political committee. C 00343384

Name of Employer SECURA Insurance, A Mutual Company Occupation Director-Work Comp

Receipt For:  
☐ Primary ☒ General  
☐ Other (specify)   

Aggregate Year-to-Date 270.00

Date of Receipt

   /    /   

Amount of Each Receipt this Period

270.00

\$ 10.00 bi-weekly

C. Full Name (Last, First, Middle Initial) Bruce A. DeFouw

Mailing Address 7842 Meadowood Dr.

City Hudsonville State MI Zip Code 49426

FEC ID number of contributing federal political committee. C 00343384

Name of Employer SECURA Insurance, A Mutual Company Occupation Sr. Market Manager

Receipt For:  
☐ Primary ☒ General  
☐ Other (specify)   

Aggregate Year-to-Date 270.00

Date of Receipt

   /    /   

Amount of Each Receipt this Period

270.00

\$ 10.00 bi-weekly

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

805.00

2010-01-10 10:00:00 AM

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE OF

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SECURA INSURANCE A MUTUAL COMPANY PAC (SECURA INS PAC)

Full Name (Last, First, Middle Initial)

A. Dye Glen E.

Mailing Address

4266 E. Hinsdale Circle

City

Centennial

State

CO

Zip Code

80122

FEC ID number of contributing  
federal political committee.

C 00343384

Name of Employer SECURA  
Insurance, A Mutual Company

Occupation  
RVP-Sales

Receipt For:

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

MM / DD / YYYY

Amount of Each Receipt this Period

270.00

\$ 10.00 bi-weekly

Full Name (Last, First, Middle Initial)

B. Erneron Harvey L.

Mailing Address

15206 Danbury Ave.

City

Rosemount

State

MN

Zip Code

55068

FEC ID number of contributing  
federal political committee.

C 00343384

Name of Employer SECURA  
Insurance, A Mutual Company

Occupation  
RVP-Sales

Receipt For:

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

MM / DD / YYYY

Amount of Each Receipt this Period

270.00

\$ 10.00 bi-weekly

Full Name (Last, First, Middle Initial)

C. Ferris Daniel P.

Mailing Address

2365 Woodland Hills Dr.

City

Menasha

State

WI

Zip Code

54952

FEC ID number of contributing  
federal political committee.

C 00343384

Name of Employer SECURA  
Insurance, A Mutual Company

Occupation  
VP, Gen. Counsel + Corp Sec

Receipt For:

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

MM / DD / YYYY

Amount of Each Receipt this Period

270.00

\$ 10.00 bi-weekly

SUBTOTAL of Receipts This Page (optional).....▶

810.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE OF

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SECURA INSURANCE A MUTUAL COMPANY PAC (SECURA INS PAC)

A. Full Name (Last, First, Middle Initial) Mall Gregory A.  
Mailing Address 3313 N. Rambling Rose  
City Appleton State WI Zip Code 54914

FEC ID number of contributing  
federal political committee.

C 00343384

Name of Employer SECURA Insurance, A Mutual Company

Occupation Director- IT

Receipt For:

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

MM / DD / YYYY

Amount of Each Receipt this Period

270.00

\$ 10.00 bi-weekly

B. Full Name (Last, First, Middle Initial) Van Den Brandt Jean A.  
Mailing Address 1207 S. Clara St.  
City Appleton State WI Zip Code 54915

FEC ID number of contributing  
federal political committee.

C 00343384

Name of Employer SECURA Insurance, A Mutual Company

Occupation VP-Marketing

Receipt For:

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

MM / DD / YYYY

Amount of Each Receipt this Period

270.00

\$ 10.00 bi-weekly

C. Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C 00343384

Name of Employer SECURA Insurance, A Mutual Company

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

MM / DD / YYYY

Amount of Each Receipt this Period

\$ bi-weekly

SUBTOTAL of Receipts This Page (optional).....

540.00

TOTAL This Period (last page this line number only).....

2155.00



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE OF

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

SECURA INSURANCE A MUTUAL COMPANY PAC (SECURA INS PAC)

Full Name (Last, First, Middle Initial)

A. NAMIC- PAC

Mailing Address

122 C Street NW Suite 540

City State Zip Code

Washington D.C.

Purpose of Disbursement

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

08 / 03 / 2015

Amount of Each Disbursement this Period

5,000.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

5,000.00

5,000.00



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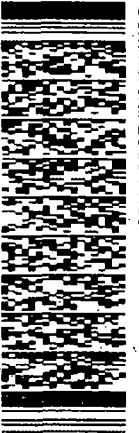
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**\$5.54**

JAN 13 2016

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2401 S Memorial Dr  
Appleton, WI 54915-1429

**C000 0004**

**SHIP TO:**

**CHRISTOPHER MORSE  
FEDERAL ELECTION COMMISSION  
999 E St NW  
Washington, DC 20463-0002**

**USPS TRACKING #**



9405 5102 0083 0005 7955 04

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<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

PREPARER  
(3/2015)

*[Signature]*

11/19/16  
DATE PREPARED

2016-11-19 10:00:00